

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION  
 A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS

 Date Received  
 FEB 23 2012  
 Original

 FAIR POLITICAL  
 PRACTICES COMMISSION  
 COVER PAGE

 RIVERSIDE COUNTY CLERK  
 LARRY W. WARD

Please type or print in ink.

12 FEB 27 AM 8:20

NAME OF FILER

(LAST)

(FIRST)

Benoit

John

J.

**1. Office, Agency, or Court**

Agency Name

Riverside County Board of Supervisors

Division, Board, Department, District, if applicable

Fourth District

Your Position

County Supervisor

► If filing for multiple positions, list below or on an attachment.

Agency: (See attached)

Position:

**2. Jurisdiction of Office (Check at least one box)**☐ State☐ Judge or Court Commissioner (Statewide Jurisdiction)☐ Multi-County☒ County of Riverside☐ City of☐ Other**3. Type of Statement (Check at least one box)**☒ Annual: The period covered is January 1, 2011, through December 31, 2011.☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 7☐ Schedule A-1 - Investments - schedule attached☐ Schedule C - Income, Loans, & Business Positions - schedule attached☒ Schedule A-2 - Investments - schedule attached☒ Schedule D - Income - Gifts - schedule attached☒ Schedule B - Real Property - schedule attached☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under

(d)(5)

under the laws of the State of California that I

Date Signed

1/24/12  
by year

Signature

## STATEMENT OF ECONOMIC INTERESTS

CALIFORNIA

(Continuation Part I – Cover Page)

2011/2012 Form 700 – Annual

Fair Political Practices Commission

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### **JOHN J. BENOIT**

73-710 Fred Waring Drive, Suite 222, Palm Desert CA 92260

760-863-8211

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#### **Agency and Position Title** (continued from page 1)

- California State Association of Counties, Board Member
- Coachella Valley Association of Governments, Executive Committee Member
- Coachella Valley Conservation Commission, Board Member
- Coachella Valley Enterprise Zone, Board Member
- Coachella Valley Mountains Conservancy, Board Member
- Coachella Valley Water District – Joint Policy Advisory Committee
- Community Facilities District Legislative Body
- Disaster Council
- Housing Authority
- Industrial Development Authority
- In-Home Supportive Services Public Authority
- Jacqueline Cochran Regional Airport Authority, Board Member
- Mojave Desert Air Quality Management District, Board Member
- National Association of Counties (NACO)
- Palm Springs Desert Resorts Convention & Visitors Bureau, Board Member
- Palo Verde Valley Transit Authority, Board Member
- Regional Access Project Foundation, Inc., Board Member
- Riverside County Assessor's office
- Riverside County Indian Gaming Local Benefits Committee
- Riverside County Local Agency Formation Commission (Alternate)
- Riverside County Parks And Open-Space District
- Riverside County Public Financing Authority
- Riverside County Redevelopment Agency
- Riverside County Transportation Commission, Commissioner
- Riverside County Transportation Commission – Executive Committee
- Salton Sea Authority, Board Member
- South Coast Air Quality Management District , Board Member
- Southern California Regional Airport Authority
- SunLine Transit Agency, Board Member

- Surplus Property Commission
- United States District Court Financing Corporation
- Urban Counties Caucus, Board Member
- Waste Resources Management District
- Western Riverside Council of Governments, Board Member
- Western Riverside County Regional Conservation Authority

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

|   |
|---|
| <b>CALIFORNIA FORM 700</b><br>FAIR POLITICAL PRACTICES COMMISSION |
| Name<br><b>BENOIT, JOHN J.</b>                                    |

|  |   |
|--|---|
| <b>► 1. BUSINESS ENTITY OR TRUST</b>   |   |
| Patrick Lamontagne Trust   |   |
| Name<br>Northern Trust, Chicago, IL  |   |
| Address (Business Address Acceptable)  |   |
| Check one<br><input checked="" type="checkbox"/> Trust, go to 2 <input type="checkbox"/> Business Entity, complete the box, then go to 2   |   |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |   |
| FAIR MARKET VALUE<br><input type="checkbox"/> \$0 - \$1,999<br><input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE:<br>____/____/11    ____/____/11<br>ACQUIRED    DISPOSED |
| NATURE OF INVESTMENT<br><input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other   |   |
| YOUR BUSINESS POSITION   |   |

|   |   |
|---|---|
| <b>► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</b>            |   |
| <input type="checkbox"/> \$0 - \$499<br><input type="checkbox"/> \$500 - \$1,000<br><input type="checkbox"/> \$1,001 - \$10,000 | <input checked="" type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> OVER \$100,000 |

|   |  |
|---|--|
| <b>► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)</b> |  |
|   |  |
|   |  |

|   |   |
|---|---|
| <b>► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST</b>   |   |
| Check one box:<br><input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY  |   |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  |   |
| Description of Business Activity or City or Other Precise Location of Real Property   |   |
| FAIR MARKET VALUE<br><input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000                                  | IF APPLICABLE, LIST DATE:<br>____/____/11    ____/____/11<br>ACQUIRED    DISPOSED |
| NATURE OF INTEREST<br><input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership<br><input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____ |   |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached  |   |

Comments: \_\_\_\_\_

|  |   |
|--|---|
| <b>► 1. BUSINESS ENTITY OR TRUST</b>   |   |
| Name   |   |
| Address (Business Address Acceptable)  |   |
| Check one<br><input type="checkbox"/> Trust, go to 2 <input type="checkbox"/> Business Entity, complete the box, then go to 2  |   |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |   |
| FAIR MARKET VALUE<br><input type="checkbox"/> \$0 - \$1,999<br><input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000 | IF APPLICABLE, LIST DATE:<br>____/____/11    ____/____/11<br>ACQUIRED    DISPOSED |
| NATURE OF INVESTMENT<br><input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Other   |   |
| YOUR BUSINESS POSITION   |   |

|   |  |
|---|--|
| <b>► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)</b>            |  |
| <input type="checkbox"/> \$0 - \$499<br><input type="checkbox"/> \$500 - \$1,000<br><input type="checkbox"/> \$1,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> OVER \$100,000 |

|   |  |
|---|--|
| <b>► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)</b> |  |
|   |  |
|   |  |

|   |   |
|---|---|
| <b>► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST</b>   |   |
| Check one box:<br><input type="checkbox"/> INVESTMENT <input type="checkbox"/> REAL PROPERTY  |   |
| Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  |   |
| Description of Business Activity or City or Other Precise Location of Real Property   |   |
| FAIR MARKET VALUE<br><input type="checkbox"/> \$2,000 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> \$100,001 - \$1,000,000<br><input type="checkbox"/> Over \$1,000,000                                  | IF APPLICABLE, LIST DATE:<br>____/____/11    ____/____/11<br>ACQUIRED    DISPOSED |
| NATURE OF INTEREST<br><input type="checkbox"/> Property Ownership/Deed of Trust <input type="checkbox"/> Stock <input type="checkbox"/> Partnership<br><input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____ |   |
| <input type="checkbox"/> Check box if additional schedules reporting investments or real property are attached  |   |

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
**BENOIT, JOHN J.**

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
**34755 Stage Drive**

CITY  
**Thousand Palms, CA 92276**

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
11 / 11 / 11         /    / 11  
 ACQUIRED      DISPOSED

NATURE OF INTEREST  
☒ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold      ☐ Other  
    Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
**Nancy Newland**

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
**39740 St. Michael Place**

CITY  
**Palm Desert, CA 92260**

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
   /    / 11         /    / 11  
 ACQUIRED      DISPOSED

NATURE OF INTEREST  
☒ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold      ☐ Other  
    Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
**Miryam Ketagi**

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_%      ☐ None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
☐ Guarantor, if applicable

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_%      ☐ None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
☐ Guarantor, if applicable

Comments: \_\_\_\_\_

|  |
|--|
| <b>CALIFORNIA FORM 700</b><br>FAIR POLITICAL PRACTICES COMMISSION<br>Name<br>BENOIT, JOHN J. |
|--|

## SCHEDULE D

### Income – Gifts

► NAME OF SOURCE  
Jim and Jackie Lee Houston  
 ADDRESS (Business Address Acceptable)  
345 N. Via Las Palmas, Palm Springs, CA 92262  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Television Station Owners

| DATE (mm/dd/yy)     | VALUE             | DESCRIPTION OF GIFT(S) |
|---------------------|-------------------|------------------------|
| <u>01 / 08 / 11</u> | <u>\$ \$90.00</u> | <u>Dinner</u>          |
| <u>  /  /  </u>     | <u>\$</u>         | <u> </u>               |
| <u>  /  /  </u>     | <u>\$</u>         | <u> </u>               |

► NAME OF SOURCE  
Pacific Research Strategies, Inc.  
 ADDRESS (Business Address Acceptable)  
6475 E. Pacific Coast Hwy, Long Beach, CA 90803  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Public Relations & Government Affairs

| DATE (mm/dd/yy)     | VALUE             | DESCRIPTION OF GIFT(S)    |
|---------------------|-------------------|---------------------------|
| <u>04 / 28 / 11</u> | <u>\$ \$25.00</u> | <u>Tour of L.A. &amp;</u> |
| <u>  /  /  </u>     | <u>\$</u>         | <u>Long Beach Ports</u>   |
| <u>  /  /  </u>     | <u>\$</u>         | <u> </u>                  |

► NAME OF SOURCE  
Alexander Hagen, III/Empire Polo Club  
 ADDRESS (Business Address Acceptable)  
81800 Avenue 51, Indio, CA 92201  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Business Owner/Developer

| DATE (mm/dd/yy)     | VALUE              | DESCRIPTION OF GIFT(S)   |
|---------------------|--------------------|--------------------------|
| <u>04 / 30 / 11</u> | <u>\$ \$149.00</u> | <u>Stagecoach ticket</u> |
| <u>  /  /  </u>     | <u>\$</u>          | <u> </u>                 |
| <u>  /  /  </u>     | <u>\$</u>          | <u> </u>                 |

► NAME OF SOURCE  
Jim and Jackie Lee Houston  
 ADDRESS (Business Address Acceptable)  
345 N. Via Las Palmas, Palm Springs, CA 92262  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Television Station Owners

| DATE (mm/dd/yy)  | VALUE              | DESCRIPTION OF GIFT(S) |
|------------------|--------------------|------------------------|
| <u>05 / 07 /</u> | <u>\$ \$125.00</u> | <u>Dinner</u>          |
| <u>  /  /  </u>  | <u>\$</u>          | <u> </u>               |
| <u>  /  /  </u>  | <u>\$</u>          | <u> </u>               |

► NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

| DATE (mm/dd/yy) | VALUE     | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| <u>  /  /  </u> | <u>\$</u> | <u> </u>               |
| <u>  /  /  </u> | <u>\$</u> | <u> </u>               |
| <u>  /  /  </u> | <u>\$</u> | <u> </u>               |

► NAME OF SOURCE  
 \_\_\_\_\_  
 ADDRESS (Business Address Acceptable)  
 \_\_\_\_\_  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 \_\_\_\_\_

| DATE (mm/dd/yy) | VALUE     | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| <u>  /  /  </u> | <u>\$</u> | <u> </u>               |
| <u>  /  /  </u> | <u>\$</u> | <u> </u>               |
| <u>  /  /  </u> | <u>\$</u> | <u> </u>               |

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

|   |
|---|
| <b>CALIFORNIA FORM 700</b><br>FAIR POLITICAL PRACTICES COMMISSION |
| Name<br><u>BENOIT, JOHN J.</u>                                    |

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

|   |   |
|---|---|
| <p>► NAME OF SOURCE<br/><u>City of Los Angeles Office of the Mayor</u></p> <p>ADDRESS (Business Address Acceptable)<br/><u>1400 K. Street, Room 208</u></p> <p>CITY AND STATE<br/><u>Sacramento, CA 95814</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$ <u>\$40.00</u><br/>(If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input checked="" type="checkbox"/> Other - Provide Description<br/><u>Airport Parking Services</u></p> | <p>► NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$<br/>(If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description</p> |
| <p>► NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$<br/>(If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description</p>   | <p>► NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$<br/>(If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel</p> <p><input type="checkbox"/> Other - Provide Description</p> |

Comments: \_\_\_\_\_